How to Help Elite Athletes Cope Psychologically With Season-Ending Injuries

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One risk for any serious competitive athlete is that of season-ending injury, and this is especially true for elite skiers. In fact, one member of the U.S. Ski Team summed it up best when he said that season-ending injury is an “occupational hazard” for team members.

U.S. Ski Team statistics support this. At the time the study described herein began, 41% of all the 1993–94 U.S. Ski Team members had sustained a season-ending injury at some point in their career. And as many as 73% of active World Cup or Olympic medal winners had experienced a severe injury.

In light of these statistics, U.S. Skiing established an aggressive and highly successful year-round, off-mountain physical training program that has prevented many injuries and helped elite skiers recover from severe season-ending injuries. This program has primarily dealt with the physical side of injuries. The psychological ramifications of skiing injuries have not been identified.

This article briefly describes a project designed to examine the psychology of season-ending injury and rehabilitation for elite skiers, especially the implications for the athletic therapist.

How This Study Was Conducted

To learn more about the psychology of ski racing injuries and recovery from them, we interviewed the skiers themselves. In particular, in collaboration with the U.S. Ski Team athletes and coaches as well as their sports medicine staffs, we conducted in-depth interviews with 21 members of the U.S. Alpine and Freestyle Ski Team who had sustained season-ending injuries between 1991 and 1993.

A season-ending injury was defined as one that prevented a skier from completing a ski racing season and kept him or her off skis for at least 3 months.

Of the 21 skiers, 11 were male and 10 were female. Seven of the 21 were freestyle skiers and 14 were Alpine skiers. Ten of the skiers had had more than one season-ending injury while the remaining 11 spoke of their only season-ending injury when interviewed.

Fifteen skiers suffered their injuries in practice while the other 6 were injured during competition. Of the 21 skiers, 15 had sustained knee injuries (typically ACL), 2 skiers sustained back injuries, 3 had leg and/or hip injuries, and 1 skier suffered a head injury.

We wanted to learn from the experiences of these athletes. In particular, we wanted to learn about their psychological reactions to injury, the stresses involved in injury and recovery, factors found to facilitate recovery, and recommendations for other injured skiers, ski coaches working with injured skiers, and sports medicine personnel.

What Was Found?

Nineteen of the 21 skiers who were interviewed gave one or more specific recommendations for athletic therapists who work with injured skiers. In fact, with respect to providing recommendations for sports medicine personnel in general (athletic trainers, physical therapists, physicians), 67 recommendations were extracted from typed transcripts of the interviews and, based on their similarity, were formed into 9 general categories:

1. Educate and inform.
2. Use appropriate motivation.
3. Show empathy and support.
4. Have a good personality.
5. Facilitate positive interactions.
6. Customize training for athletes.
7. Demonstrate competence and confidence.
8. Give athletes confidence.
9. Other.

One of the more frequently cited general categories, mentioned by 10 skiers, pertains to the educational role that sports medicine providers can play (Educate and Inform). There were comments such as, “Tell athletes exactly what happened in surgery.” “Explain how a particular exercise helps,” and “Teach athletes about the body.”

Moreover, several athletes felt it would be helpful if sports medicine providers worked more closely with coaches to facilitate a shared understanding between medical providers, coaches, and injured athletes as to the athlete’s capabilities and limitations during the recovery process. These skiers wanted their sports medicine specialists to be good educators.

Another salient category had to do with the motivational role of sports medicine providers (Use Appropriate Motivation). This category was also cited by 10 skiers as important, as reflected in comments such as, “Be a real motivator,” “Be a model of motivation,” and “Keep the athlete going all the time.”

A number of athletes said it was important for the sports medicine provider to be able to recognize the fine line between pushing too hard and not pushing hard enough, which is the difference between being too aggressive and being too lenient. According to one skier, the athletic therapist must, “push you, but not too hard.” Said another, “They [sports medicine therapists] need to push you a lot, yet they . . . need to hold on the reins a little bit too.”

Clearly, then, these elite athletes did not view their sports medicine providers only as individuals with medical expertise. They also looked to them for motivation and encouragement.

Such motivation and encouragement may be especially important for elite skiers who are injured during the season, since they most likely will lose a larger segment of their social support network than, for example, a high school athlete. That’s because the other skiers and coaches will continue to travel to competition sites around the world while the injured athlete is left home to recover.

Given this potential loss of social support, it’s understandable why injured skiers might look to their sports medicine providers for encouragement and support. Hence the providers should be ready to provide such support.

The Show Empathy and Support category was cited by 9 of the 21 skiers. Some specific recommendations we heard were, “Listen to the athlete,” “The doctor should place trust in athlete’s judgment,” “Stay positive,” “Be sympathetic when the athlete is hurting,” and “Realize that skiers have feelings.” This theme was nicely reflected in the following comments:

“You know, just realize . . . that we’re people, not just bones.”

“Be very caring, very; you know, the athlete has a whole lot of questions; be there to answer all the questions . . . when they are scared or crying, let them cry on your shoulder.”

“What makes them so good is that, just being more human instead of just like, ‘all right, hang in the next guy’. Oh, that [being human] definitely makes them the best doctors out there.”

Related to the previous category was the one labeled Have a Good Personality, which was mentioned by 5 of the 21 skiers. Among their recommendations were, “Be dynamic in one’s personality,” “Always be in a good mood,” and “Have a warm, open personality.” Interestingly, several athletes emphasized the importance of the sports medicine provider recognizing his or her fallibility in this category with such comments as, “Realize that you are not always right,” and “When you are not sure, let the athlete know.”